The Spirit of Care: Integrating Chaplains into the PACE Continuum
A Presentation for the National PACE Association Conference 2017, Boston, MA

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St. Francis LIFE
Learning Objectives

• Learn basic frameworks of spiritual care used in PACE programs;

• Identify benefits and challenges of integrating spiritual care into YOUR program;

• Identify practical ideas for implementing or enhancing spiritual care.
### Spiritual Care and PACE

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WHAT DOES A PACE CHAPLAIN DO?
What Is (and Isn’t) Spiritual Care?

IS...

Spiritual, emotional, social;
Individual and/or group;
Crosses continuum of care;
Empathic &/or active listening;
Explores existential Issues;
Prayerful/meditative…or not;
Bereavement support.

IS NOT...

Psychotherapy or social work.
Why Provide Spiritual Care?

- A richer and more complete experience for participants.

“I am very happy with the spiritual care program. It is very uplifting.”

(B.H., a longtime CEI participant)
Why Provide Spiritual Care?

- *Added and often welcome support for families and caregivers.*

“Thank you for journeying with J during his last two weeks of life on earth. You were a great source of consolation and strength for him during that time of making his final decisions.”

(CEI participant’s family members)
Why Provide Spiritual Care?

- *Meets the PACE promise of “All-Inclusive Care.”*

“(The Chaplain) is not looking at physical sickness versus health, or function versus dysfunction, but something entirely different: Autonomy, purpose, meaning.”

(Susan M., CEI Physical Therapist)
Caring for the Whole Person

In every season of life
St. Francis LIFE (Living Independently for Elders) is one of more than 230 PACE centers in 31 states that offer this unique model of care.

- Opened in February, 2013 and is the only PACE center in Delaware.

- We currently serve 223 participants throughout the New Castle County service area

- LIFE plans to open a second center in the Newark area in the near future.

Senior population 55+ in New Castle County: 162,513; 2,952 eligible for PACE. LIFE serves approximately 7.55% (Source: PACE penetration analysis by Health Dimension Group.)
Role in PACE and IDT
It is not what you look at that matters, it is what you see.

Henry David Thoreau

Inspiring lives at LIFE!
Saint Francis LIFE

Spiritual Care Mission

*Inspire all of life…in every season of life*
Spiritual Care IDT Values

- Compassionately communicate
- Establish a spiritual care framework
- Respect
- Engender trust
Vision: Inspiring Lives at LIFE!

Clinicians and spiritual care providers

Key

- Patients process
- Transformative interaction

BCC: Board certified chaplain
Clinicians: Chaplains, physicians, nurse, social workers
Community providers: community religious leaders, spiritual director pastoral and community counselors, faith community nurses, physical therapists, occupational therapists, and others
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Spiritual Care Goals for *Participants*

- Continuously evolving and customized
- Participant self-care and independence
- Appropriately balanced resource and support-based care
Spiritual Care Offering

- Health Advocacy
- Small Group Study and Support
- Music Inspiration
- Prayer Intercession
- Ecumenical Services
- Spiritual Assessment
- Cultural Engagement
- Bereavement Support
- Hospice Care
- Outreach/Creative Expression
- Nursing Home/Hospital Visitation
- Spiritual Guidance & Pastoral Counseling
- Outreach/Creative Expression
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IDT Thoughts on Spiritual Care

- Dietary Manager
  - Safe and comforting outlet, that some might otherwise not have, to process complex feelings about their health issues, grief/loss and mortality
  - Form of stress relief
  - Feeling of belonging
  - Sense of purpose for some
  - Different and important aspect of health/well-being for IDT team to consider when caring for participants

Having spiritual care as part of the PACE model allows for the unique opportunity to have that perspective included in IDT discussions regarding care for our participants. Spiritual care needs are as important to address for our participants as are physical, social and emotional health needs at this stage of life.
Day Center Manager

- Spiritual care allows our Participants have a connection with our higher power through Cheryl's sermons, choir, spiritual activities, etc.
- Most of our Participants are forced to practice their religious beliefs behind four walls in their homes due to limited mobility, transportation, etc.
- The spiritual music is uplifting and brings positivity on days our Participants may be feeling down and depressed.
IDT Thoughts on Spiritual Care

- Nurse Manager
  - I know that Spiritual Care is more than religious practices:

  - Spiritual Care in the PACE model addresses the fact that when one's "spirit" is broken, support is needed to mend it. No medicine or tangible intervention will do the job, but spiritual care does it.

  - It also addresses the fact that we all are affected physically and emotionally when our spiritual health is failing.

  - Spiritual care also addresses dealing with the losses that one experiences during later life, such as, loss of independence, stature in the family, loss of loved ones, and many other losses that the physical and "mind" part of the PACE model do not address. Our participants experience many of these drastic changes by the time they reach our program. It is the spiritual care that focuses on these changes.
Spiritual Care Benefits and Challenges

- Intangible but critical value
- Role clarification with all team members
- Clear, compassionate and effective communication
- Time management and project prioritization
- Honing cultural and diversity of faith-tradition competencies
Questions and Answers
En-Spiriting Care: Including Chaplains on the IDT
Rabbi Shifrah Tobacman, M.P.A., M.A., Lead Chaplain
The Center for Elders’ Independence

- Based in Oakland, CA.
- 710 Participants.
- 4 adult day centers.
- Additional day center opens 11/17.
- First chaplain hired 2/16.
- Second chaplain hired 9/17.
FUNDING FOR SPIRITUAL CARE

• Original grant funding.

• Built into revenue from traditional PACE budget.

• Making the case.
CEI Participants are Diverse

Participant Ethnicity

- African American: 39.00%
- Native American: 22.00%
- Caucasian: 19.00%
- Latino: 11.00%
- Asian/Pacific Islander: 6.00%
- Other: 3.00%
Vision of Spiritual Care at CEI

Provide an integrated, whole person and culturally aware approach to spiritual care for participants, families and caregivers across the CEI care continuum.
Initial Goals

• Clarify life care planning program/processes (ADHC, POLST);

• Enhance support for participants and families with end of life issues and bereavement.
Medium Term Goals

• Increase staffing.

• Enhance services with external resources.

• Increase educational opportunities for staff and providers.
ONGOING GOAL

• Make high quality spiritual care available for CEI participants and families across the continuum of care.
The PACE-Time Continuum

- End of Life
- Bereavement Support
- Day-to-Day
- Forming Relationships

In the beginning…
Referrals

- IDT meetings
- Team outside of meetings
- Comfort care and end of life
- Self-referral
- Day center interactions
Day-to-Day

- General emotional and spiritual support.
- Morale boost – day center.
- When we can’t do much else.
End of Life

**IF THIS IS HAPPENING...**
- Participant transitioning at end of life.

**DO THIS, SO THAT...**
- NOTIFY CHAPLAIN IMMEDIATELY.
- Alert chaplain of situation and any upcoming conferences.

**THIS HAPPENS**
- Chaplain will visit participant and/or family asap.
- Chaplain will visit participant, connect with family, and attend conferences as needed.

**Participant** is undergoing major decline, treatment decision or health status change.
- Participant may go onto hospice OR comfort care;
- Hospice OR comfort care initiated.
Bereavement Support

- Families/Caregivers
- Participants
- Staff
ROLE ON THE IDT

- Represent participant spiritual care needs.
- Identify opportunities for spiritual care.
- Offer a values-based perspective.
- Think outside the (medical) box.
- Educate staff on spiritual care and its benefits for them and participants.
Adding Depth to Breadth

“Spiritual care adds such a valuable dimension to our social services because it encompasses areas that participants may not feel comfortable exploring in depth with other staff members.”

(Anne S., CEI Social Worker)
Bereavement Support

“Having spiritual care services has provided much comfort to our participants who are at end of life or are dealing with bereavement issues… It gives participants greater access to their spiritual resources for coping with stress and loss.”

(Anne S., CEI Social Worker)
“(The chaplain) knows how to uplift the spirits of the participants as well as the staff, and to approach them in a diplomatic and loving way, being respectful of the individual’s feelings, morals and cultural values.”

(Mary Ann P, CEI Activities Director)
“(Spiritual Care) is invaluable for so many of our participants who find strength in prayer. But it also helps the sense of well-being for all of our participants, whether it be dealing with end of life care or just coping with chronic illness. I certainly appreciate the chaplain’s input on our team.”

(Ana B., CEI HCRN)
Challenges

Complex environment of PACE.

Providing consistent bereavement support for families/caregivers.

Providing quality spiritual care for people of multiple traditions speaking multiple languages, especially in context of day center.

Varied professional ethos and approaches among disciplines.

PATIENCE!
PERSISTENCE!
“Just to be is a blessing. Just to live is holy.”

(Rabbi Abraham Joshua Heschel)
INCORPORATING SPIRITUAL CARE INTO YOUR PACE PROGRAM
Contact Information

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